

Position Statement

ANNA, ASN and RPA Joint Position Paper On Collaboration Between Nephrologists and Advanced Practice Registered Nurses

The American Nephrology Nurses Association (ANNA), the American Society of Nephrology (ASN) and the Renal Physicians Association (RPA) support the collaborative practice of nephrologists and Advanced Practice Registered Nurses (APRN) as health care providers in an interdisciplinary team approach. Nephrologists and APRNs collaborate in the delivery of care and treatment of patients in all stages of chronic kidney disease (CKD), acute care, and general nephrology management. The title "Advanced Practice Registered Nurse" has been endorsed by ANNA to designate both the Clinical Nurse Specialist and the Nurse Practitioner providing direct care to patients.

The ANNA, ASN and RPA support the following credentials for APRNs in nephrology practice: 1) masters or doctorate prepared as a Nurse Practitioner (NP) or Clinical Nurse Specialist (CNS); 2) certified as a Nephrology Nurse-Nurse Practitioner (CNN-NP). All three organizations recognize that certain individuals may be able to show evidence of education and experience equivalent to the above criteria and may be grandfathered into APRN roles when the applicable state law permits.

The ANNA, ASN and RPA agree that the Scope of Practice of the APRN is focused on providing care for patients with acute and chronic kidney disease and the associated sequelae. The professional role of the nephrology APRN includes the provision of services across the health wellness-illness continuum, with an emphasis on health promotion and restoration, disease prevention, and patient and staff education. APRN's serve as health care resources, interdisciplinary consultants and patient advocates, providing cost effective care and improving the clinical care and the continuity of that care for CKD patients. Nephrology APRNs practice in a collaborative relationship with nephrologists by rounding in dialysis facilities and hospitals, prescribing and dispensing medication, collecting, ordering, and interpreting laboratory results, ordering therapies, collecting patient histories and performing physical exams and arranging referrals. In these areas there may be an overlap of the respective scopes of practice between physicians and APRNs. In a collaborative practice in which both the APRN and nephrologist provide care for the same patient, each practitioner is responsible and accountable for his/her own actions. In this situation, the nephrologist accepts ultimate responsibility for patient care decisions.

Due to variance in state laws the scope of practice of nephrology APRNs may differ; however, ANNA, ASN and RPA support a collegial relationship with shared patient care responsibilities. The nature of clinical nephrology and dialytic therapy support interdependent roles for the APRN and nephrologist. ANNA, ASN and RPA agree that delineation of responsibilities should be clarified upon employment and should be directly related to the education, training and credentials of the individual, and that where necessary clinical protocols be developed to enhance effectiveness and efficiency in achieving positive patient outcomes.

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ANNA Position Statements are reviewed and reaffirmed biennially.